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Bib Data Sheet

CONFIRMATION NO. 1713

SERIAL NUMBER 09/127,767	FILING DATE 07/31/1998 RULE	CLASS 380	GROUP ART UNIT 2134	ATTORNEY DOCKET NO. 2925-0161P	
APPLICANTS SARVAR PATEL, MONTVILLE, NJ; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/20/1998					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY NJ	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
ADDRESS 30594 HARNESS, DICKEY & PIERCE, P.L.C. P.O. BOX 8910 RESTON , VA 20195					
TITLE METHOD FOR TWO PARTY AUTHENTICATION AND KEY AGREEMENT					
FILING FEE RECEIVED 834	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____		

SERIAL NUMBER 09/127,767	FILING DATE 07/31/98	CLASS 455	GROUP ART UNIT 2744	ATTORNEY DOCKET NO. 2925-0161P
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APPLICANT

SARVAR PATEL, MONTVILLE, NJ.

CONTINUING DOMESTIC DATA***
VERIFIED

None SK

371 (NAT'L STAGE) DATA***
VERIFIED

None SK

FOREIGN APPLICATIONS***
VERIFIED

None SK

FOREIGN FILING LICENSE GRANTED 08/20/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
Verified and Acknowledged <u>SK</u> Examiner's Initials _____	Initials _____			

ADDRESS	BIRCH STEWART KOLASCH & BIRCH	Customer # 30594
	P O BOX 747 FALLS CHURCH VA 22040-0747	

TITLE	METHOD FOR TWO PARTY AUTHENTICATION AND KEY AGREEMENT
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FILING FEE RECEIVED \$834	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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